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CONFIRMATION NO. 7054

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/691,632	10/18/2000	455	2682	40689/CAG/B600
RULE				

APPLICANTS

Shervin Moloudi, Los Angeles, CA;
 Ahmadreza Rofougaran, Marina Del Rey, CA;
 Maryam Rofougaran, Rancho Palos Verdes, CA;

** CONTINUING DATA *****

This application is a CON of 09/634,552 08/08/2000
 which claims benefit of 60/160,806 10/21/1999
 and claims benefit of 60/163,487 11/04/1999
 and claims benefit of 60/163,398 11/04/1999
 and claims benefit of 60/164,442 11/09/1999
 and claims benefit of 60/164,194 11/09/1999
 and claims benefit of 60/164,314 11/09/1999 *
 and claims benefit of 60/165,234 11/11/1999
 and claims benefit of 60/165,239 11/11/1999
 and claims benefit of 60/165,356 11/12/1999
 and claims benefit of 60/165,355 11/12/1999
 and claims benefit of 60/172,348 12/16/1999
 and claims benefit of 60/201,335 05/02/2000
 and claims benefit of 60/201,157 05/02/2000
 and claims benefit of 60/201,179 05/02/2000
 and claims benefit of 60/202,997 05/10/2000 *
 and claims benefit of 60/201,330 05/02/2000
 (*)Data provided by applicant is not consistent with PTO records.

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/12/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	48	31	3
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

CHRISTOPHER C. WINSLADE
 MCANDREWS, HELD & MALLOY
 500 W. MADISON STREET
 SUITE 3400
 CHICAGO, IL 60661

TITLE

ADAPTIVE RADIO TRANSCEIVER WITH AN ANTENNA MATCHING CIRCUIT

FILING FEE RECEIVED 1146	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees								
<input type="checkbox"/> 1.16 Fees (Filing)								
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